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First Came Phishing, Now There’s … Smishing

1 message

AARP Fraud Watch Network <AARP@email.aarp.org>  
Wed, Feb 24, 2021 at 3:03 PM  
Reply-To: "Kathy Stokes, AARP Fraud Watch Network" <reply-fe92117273650c7d72-21_HTML-11371932-1067319-28003@email.aarp.org>  
To: acecox49@gmail.com

A fraud alert from Kathy Stokes, AARP Fraud Watch Network | View email online

-Fraud Watch Network-

First Came Phishing, Now There’s … Smishing

Dear Arthur,

Most of us have heard of the term “phishing.” But did you know that phishing done by SMS (that stands for Short Message Service) text message has its own name? That’s right, it’s called “smishing.” (Get it? SMS + phishing?) And just like other types of phishing, smishing relies on the senders pretending to be someone they are not in hopes of getting ahold of your money or personal information.

How It Works

• You receive a text message that appears to be from a government agency or a company you are otherwise familiar with.

• The text asks for personal information, such as a Social Security number or an online account password.

• It may direct you to click a link to resolve a problem or access a service — during the ongoing pandemic, it may relate to COVID-19 testing, vaccines or contact tracing.
What You Should Know

- Scammers use technology to make it appear that texts are coming from a particular number, like the IRS or Social Security Administration, or from a company you may do business with.
- The message will relay seemingly urgent information that requires you to act right away — your benefits have been suspended, your account has been compromised, or you need to sign up for a COVID-19 vaccine, for example.
- The message will include a link for you to click on to address the situation.

What You Should Do

- Develop a habit of pausing before clicking on texts. Surveys show we are more likely to read and react to a text message than an email, which is why scammers have flocked to smishing.
- Don’t click on links from suspicious texts; it may result in loading malicious software onto your device that will harvest your credentials, or sending you to a website that will do the same.
- If you have reason to believe the text may be legitimate, reach out to the sender — the IRS, UPS, Amazon or whomever — at a number or web address you know to be legitimate.

When it comes to fraud, vigilance is our number one weapon. You have the power to protect yourself and your loved ones from scams. Please share this alert with friends and family and visit the Fraud Watch Network.

Sincerely,

Kathy Stokes
AARP Fraud Watch Network

P.S. Are you active on social media? Do you enjoy sharing information that can help prevent friends and family from falling victim to scams? Become a volunteer AARP Fraud Watch Network (FWN) Digital Fraud Fighter! Interested? Send us a note at FWN@aarp.org for more information!
6 Stomach Symptoms You Should Never Ignore

They can signal cancer, COVID-19 or another serious disease

by Michelle Crouch, AARP (http://www.aarp.org), Updated March 15, 2021 | Comments: 70

En español (/español/salud/enfermedades-y-tratamientos/info-2020/sintomas-estomacales-que-no-debes-ignorar.html?intcmp=AE-HLTH-TOSPA-TOGL-ES). Everyone has stomach issues from time to time, and occasional digestive discomfort is not usually something to worry about.

That said, doctors note that there are a few gastrointestinal symptoms that you shouldn’t write off, because they could signal something serious.

“I’ve seen many cases where patients have waited way too long before seeking medical attention,” says Christine Lee, a gastroenterologist at the Cleveland Clinic.

With studies showing that the coronavirus can cause gastrointestinal symptoms, patients have even more reason to take nausea, vomiting and prolonged diarrhea seriously, doctors say.

Here are six symptoms you should never ignore and what they may mean.

**Prolonged diarrhea (especially if paired with fever, cough or loss of taste and smell)**
Diarrhea and other gastrointestinal symptoms can be among the first signs of coronavirus infection, appearing before more well-known symptoms such as cough or fever, says Brennan Spiegel, M.D., director of health services research for Cedars-Sinai Medical Center in Los Angeles.

"Don't wait for a cough or shortness of breath to get tested for COVID" if you have diarrhea, nausea/vomiting or abdominal pain that lasts more than a day, says Spiegel, who is also editor-in-chief of the American Journal of Gastroenterology.

Studies show that as many as half of COVID-19 patients have gastrointestinal symptoms, and about 15 to 20 percent have only gastrointestinal symptoms. Diarrhea is the most frequently reported symptom, followed by nausea/vomiting and abdominal pain. Spiegel's research found that COVID-19 patients with diarrhea typically have four to five bouts a day.

“One bout of diarrhea may not mean anything,” Spiegel says. “But if you’re having three or four per day and it is going on two days and you have no history of diarrhea, it’s a good idea to talk to your doctor, whether we’re in a pandemic or not.”

If it’s not COVID-19, prolonged diarrhea could signal another type of infection or an underlying condition like ulcerative colitis or irritable bowel syndrome.

**Blood in your stool**

Whether it's bright red, maroon or black, seeing blood in the toilet can be frightening. Fortunately, it's usually not life-threatening, says Nicholas E. Anthony, a gastroenterologist at Atrium Health in Charlotte, North Carolina. The most common causes are hemorrhoids and anal fissures (tears in the lining of the anus). But blood in your stool can also be one of the first symptoms of colon cancer (/health/conditions-treatments/info-2019/colorectal-cancer-screening-guidelines.html), especially if it's accompanied by a change in your bowel habits or the shape of your stool. Since colon cancer is more common (https://www.cdc.gov/cancer/colorectal/basic_info/risk_factors.htm) among those over age 50, it's especially important for older adults to see a doctor without delay. Other possible causes of bleeding are colon polyps, inflammatory bowel disease, colitis and diverticulosis.

**Difficulty swallowing**

If you feel like your food is getting stuck in your throat or it hurts as it's going down, that can be a sign of something serious. "The big thing we worry about is esophageal cancer," Anthony says. Esophageal cancer (https://ephtracking.cdc.gov/showEsophagealCancer.action) is more common in adults over 55 and three or four times more likely to occur in men than women, according to the Centers for Disease Control and Prevention. Other things that can cause discomfort when you swallow include an infection, an ulcer, a sore or scar tissue (which can develop if you have chronic acid reflux). In addition, a growing number of people are being diagnosed with eosinophilic esophagitis (EOE), a chronic allergic inflammatory disease that is a major cause of swallowing issues. To pinpoint the cause of your problem, your gastroenterologist will probably insert a tube with a camera attached to it down your throat in a procedure called an endoscopy.
Unexplained weight loss (especially if accompanied by abdominal pain)

Weight loss when you haven't changed your diet or exercise habits is a common symptom of many serious illnesses, including cancer, Lee says. “Most people gain weight as they get older because their metabolism slows down,” she says. “If you're losing weight without much effort, that's a red flag.” See a doctor if you've dropped 5 percent or more of your body weight within six to 12 months. Although it is a symptom of some types of cancer, a 2014 study [https://www.aafp.org/afp/2014/0501/p718.html](https://www.aafp.org/afp/2014/0501/p718.html) published in the journal American Family Physician found that in patients over 65, such weight loss is often due to other causes, like peptic ulcers, celiac disease, inflammatory bowel disease or an overactive thyroid.

Chronic or prolonged constipation (especially if you're having pain)

Almost everyone experiences occasional bouts of constipation, and studies show that it's especially prevalent among older adults [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4325863/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4325863/). Constipation is typically defined as three or fewer bowel movements per week. It may not seem like a big deal, but if your constipation isn't treated, over time the stools in your colon can become so large and solid that your body can't remove them — and that can be painful or even deadly, Anthony warns. “If it goes longer than seven days, I want to see you,” he says. Constipation can be caused by a wide variety of issues, including certain medicines, a diet low in fiber, and medical conditions such as irritable bowel syndrome, thyroid issues, diabetes or, in rare cases, colorectal cancer.

Sudden, intense abdominal pain

A sharp pain that doesn’t let up can indicate acute appendicitis (if it's on your lower right side), diverticulitis or a serious infection. The context is important, Lee says, because muscle cramps and other issues can also manifest as sharp pain. "If you're an athlete rock climbing and you get a sharp pain in your abdomen that only lasts a second, you probably just pulled a muscle," she says. If it's something serious, she explains, usually the pain keeps escalating and doesn't let up.

If you don't have one of the above symptoms, don't let that keep you from seeing a gastroenterologist if you suspect that something's wrong, Lee says. The earlier you detect a problem, the more options you have and the better your chances of success at managing it.

"The longer I do this, the more I realize that it doesn't matter what the textbook says — patients know their bodies," Lee says. "If something is not normal for you, then it is a red flag, even if it's not on the list of top five. If something bothers you, you should get it checked out."

Editor's note: This story was updated to include gastrointestinal symptoms related to COVID-19.
7 Myths About Coronavirus Vaccines

Separating fact from fiction when it comes to getting vaccinated against COVID-19
by Rachel Nania and Michelle Crouch, AARP (http://www.aarp.org), Updated March 18, 2021 | Comments: 240


En español (/español/salud/farmacos-y-suplementos/info-2020/mitos-sobre-la-vacuna-covid.html?intcmp=AE-HLTH-TOSPA-TOGL-ES) | As the U.S. works to quickly roll out the new COVID-19 vaccines, the hope is that a critical mass of Americans will be vaccinated by this summer or fall so we can return to some semblance of normalcy.

However, the unprecedented speed of vaccine development and a surge of misinformation on social media has fueled skepticism about the vaccine among some Americans.

Public health experts emphasize that all COVID-19 vaccines authorized for emergency use in the U.S. went through the Food and Drug Administration’s strict vaccine development time line, which includes three phases of clinical trials to generate information on safety and effectiveness and a review by an independent panel of scientists.

Here are some prevalent coronavirus vaccine myths and the truth behind each one.

For the latest coronavirus news and advice go to AARP.org/coronavirus (/coronavirus/).

Myth #1: If you've had COVID-19 already, you don't need to get vaccinated.

The Centers for Disease Control and Prevention (CDC) says it’s important to be vaccinated even if you already had COVID-19. That’s because experts don’t know how long you are protected from COVID-19 after a previous infection — or if you are protected at all.
“Even if you have already recovered from COVID-19, it is possible — although rare — that you could be infected with the virus that causes COVID-19 again,” the CDC says.

A study published in The Lancet on March 18 found that adults age 65 and older who have tested positive for the coronavirus are significantly more likely than younger people to be reinfection with the virus. The study, which looked at the testing data of four million people in Denmark, found that adults age 65 and older who had been previously infected had only about 47.1 percent protection against a repeat infection, compared to a protection rate of about 80 percent among younger people.

The difference can likely be explained by natural changes that weaken your immune system as you age, the study’s authors said.

Another study, published by the CDC in February, described five residents in a Kentucky nursing home who recovered from the coronavirus in July 2020 and then were reinfection three months later. The residents suffered more severe symptoms during their second bout with COVID-19, the report said, and one died of the disease.

The study suggests that people who show mild to no symptoms during their first infection “do not produce a sufficiently robust immune response to prevent reinfection,” the CDC researchers wrote. The study also raises “the possibility that disease can be more severe during a second infection,” they said.

If you had COVID-19 and you were treated with monoclonal antibodies or convalescent plasma, the CDC recommends waiting 90 days to get the vaccine.

**Myth #2: Once you receive the coronavirus vaccine, you're immune for life.**

Studies are underway to determine how long immunity from a coronavirus vaccine will last. But it’s likely you will need to get the shot on a regular basis, perhaps once every three years or every year like the flu shot.

That will allow scientists to adjust the formula, if necessary, as new strains, or variants, of the coronavirus emerge.

“Right now, everyone is hoping that immunity will be pretty long-lasting, maybe several years,” says Christopher Murray, M.D., director of the Institute for Health Metrics and Evaluation at the University of Washington in Seattle.

But he says the emergence of new strains of the virus, along with the prospect of waning immunity, make annual vaccination more likely.
Myth #3: You can ditch your mask after you get vaccinated.

It takes about two weeks after your final vaccination for your body to build full protection to the coronavirus. But even after those two weeks, the CDC says you should continue to wear a mask and practice social distancing in most situations.

That’s partly because researchers don’t know yet whether the vaccine can block virus transmission. That means it’s possible that you could still carry the virus once you’ve been vaccinated and silently transmit it to others, even if you don’t have symptoms.

Perhaps more importantly, the virus will continue to spread and sicken people until the country reaches herd immunity (https://health/conditions-treatments/info-2020/herd-immunity-covid19.html), when 70 to 85 percent of Americans are vaccinated. Masks and social distancing are the best way to slow the spread of the virus until we reach that point, the CDC says.

The CDC says fully vaccinated people can gather indoors without wearing a mask or physically distancing when spending time with:

- Other people who are fully vaccinated

- Unvaccinated people from one other household, unless any of those people or anyone they live with is at increased risk for severe illness from COVID-19.

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Myth #4: The vaccines use a live version of the coronavirus.

None of the authorized vaccines in the U.S. use the live virus that causes COVID-19, and they cannot give you the disease. Instead, the vaccines use scientific techniques to train the human body to recognize and fight the coronavirus.

The Pfizer-BioNTech and Moderna vaccines deliver a small fragment of genetic code to your cells to encourage your body to produce antibodies.

The J&J vaccine works differently. It uses a harmless adenovirus that can no longer replicate to send a genetic message to your cells.

While the coronavirus vaccines will not make you sick with COVID-19, they do cause side effects (https://health/conditions-treatments/info-2020/coronavirus-vaccine-side-effects.html) in some people. Commonly reported side effects include injection-site pain, fatigue, headache, chills, fever and muscle aches. Most of the reactions are temporary and resolve within a few days, according to the CDC. Experts stress that they are a sign the vaccines are working.

Myth #5: mRNA vaccines can alter your DNA.

COVID-19 vaccines do not change or your DNA, the CDC says.

The Pfizer-BioNTech and Moderna vaccines both use a new type of technology called messenger RNA, or mRNA (https://health/drugs-supplements/info-2020/mrna-vaccines-explained.html) for short. Think of mRNA as an instruction manual: It directs the body to build an immune response to a specific infection. The mRNA “never enters the nucleus of the cell, which is where our DNA are kept,” the CDC says. “This means the mRNA does not affect or interact with our DNA in any way.”

Johnson & Johnson’s COVID-19 vaccine uses a harmless virus (not a coronavirus) to deliver instructions to your cells to start building immunity. The instructions are delivered in the form of genetic material that does not integrate into your DNA, the CDC says.

The CDC stresses that authorized COVID-19 vaccines are being held to the same safety and effectiveness standards as other vaccines that are approved or authorized in the U.S.

Myth #6: You don't need both doses of the two-dose vaccines.

Both the Moderna and the Pfizer-BioNTech vaccines require two doses that are given a few weeks apart. And because health experts are not sure whether one dose will be sufficiently effective in preventing COVID-19 or a severe case of the illness, skipping the second shot is not a good idea. As the CDC explains: The first shot starts building protection while the second shot boosts that protection and “is needed to get the most protection the vaccine has to offer.”
A peer-reviewed analysis (https://www.nejm.org/doi/full/10.1056/NEJMoa2034577?query=featured_home) from Pfizer/BioNTech's phase 3 clinical trial found that its vaccine was about 52 percent effective after the first shot. After the second dose, the effectiveness jumped to 95 percent.

"We don't know what happens after a single dose," William Moss, M.D., executive director of the International Vaccine Access Center at the Johns Hopkins Bloomberg School of Public Health, told AARP in a previous interview. "Certainly, we can't expect [that one dose will confer] the high degree of protection" that both doses demonstrated in phase 3 clinical trials, he added.

**Myth #7: You shouldn't get the vaccine if you've ever had an allergic reaction.**

If you have a history of allergic reactions to oral medications, food, pets, insect stings, latex or things in the environment like pollen or dust, you can safely get the COVID-19 vaccine, the CDC says. You can also get the vaccines if you have an egg allergy, because none of the authorized vaccines contain eggs or egg-related components.

The only group the agency says should definitely abstain are those who have had a severe allergic reaction to any ingredient in a COVID-19 vaccine. If you've had an allergic reaction to other vaccines or to injectable medications, the CDC recommends (https://www.cdc.gov/coronavirus/2019-ncov/downloads/vaccines/toolkits/AdditionalFAQ_COVID-19Vaccination-508.pdf) talking to your medical provider about whether to get the vaccine.

Only a small number of the people who have received a COVID-19 vaccine so far experienced the severe allergic reaction called anaphylaxis. Anaphylaxis has affected about two to five people per million vaccinated, the CDC says. Although anaphylaxis is life-threatening, it almost always occurs within 30 minutes of vaccination and can be quickly halted with a medicine such as epinephrine. All of the patients who experienced anaphylaxis after a COVID-19 vaccination recovered, the CDC says.

The agency recommends that people with a history of anaphylaxis stay on site for observation for 30 minutes after vaccination. Those with no history of anaphylaxis should stay for 15 minutes.

*This story has been updated to reflect new vaccine developments.*

**NEXT: TEST YOUR VACCINE SMARTS (/HEALTH/DRUGS-SUPPLEMENTS/INFO-2021/V**
14 States That Don't Tax Pension Payouts

Retirement income from defined benefit plans catches a break in these states

by John Waggoner, AARP (http://www.aarp.org), March 4, 2021 | Comments: 19

En español (espanol/jubilacion/jubilacion-segura/info-2021/estados-sin-cobro-de-impuestos-sobre-pensiones.html?intcmp=AF-RET-TOSPA-TOGL-ES), Retirement income comes in all forms, and pension payouts are just one of them. To the federal government, most pension payouts are fully taxable as income. To the 50 states and the District of Columbia, the tax picture for pension payouts is a bit more complicated.

A patchwork of tax rules

Eight states – Alaska, Florida, Nevada, South Dakota, Tennessee, Texas, Washington and Wyoming – don’t tax income at all. A ninth state, New Hampshire, only taxes capital gains and dividend income. (Tennessee taxes capital gains and dividends for the 2020 tax year, but not for 2021 and thereafter.)
And five states – Alabama, Illinois, Hawaii, Mississippi and Pennsylvania – exclude pension income from state taxes.

If you don’t live in those 14 states, you still may avoid paying taxes on all or some of your pension. According to Wolters Kluwer, a tax publishing company, 27 states tax some, but not all, of retirement or pension income (/money/taxes/info-2020/states-that-dont-tax-retirement-distributions.html). Typically, these states tax pension income only above a certain level of adjusted gross income. For example, Iowa allows joint filers 55 and older to exclude $12,000 from state taxable income. Other filers older than 55 may exclude $6,000.

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A patchwork of retirement income

Pensions pay out a defined amount each month until an employee dies, which is why they are called defined benefit plans. Your payout typically depends on your salary over time, and how long you worked with the company. Pensions are becoming increasingly rare (/retirement/retirement-
14 States Don’t Tax Retirement Pension Payouts

savings/info-2019/pension-cuts.html) among private employers, however: Only 14 percent of Fortune 500 companies offered a pension plan to new hires in 2019, down from 59 percent in 1998.

Increasingly, Americans have had to rely on defined contribution plans, such as 401(k) plans, for retirement income. The payout from these plans depends on how much you (and often your employer) contribute, as well as the investment returns in the plan. In most defined contribution plans, distributions are taxed as ordinary income by the federal government, but taxation varies from state to state. Of the 14 states that won’t tax your pension, two states – Alabama and Hawaii – will tax your income from defined contribution plans such as 401(k)s.

Finally, there’s Social Security income. The federal government can tax some Social Security benefits (/retirement/social-security/questions-answers/how-is-ss-taxed/), depending on your income. You’ll be taxed on:

- up to 50 percent of your benefits if your income is $25,000 to $34,000 for an individual or $32,000 to $44,000 for a married couple filing jointly.
- up to 85 percent of your benefits if your income is more than $34,000 (individual) or $44,000 (couple).

And 13 states — Colorado, Connecticut, Kansas, Minnesota, Missouri, Montana, Nebraska, New Mexico, North Dakota, Rhode Island, Utah, Vermont and West Virginia — can tax all or part of your Social Security benefits.

Taxes aren't everything

States need money to pay for roads, services and education, and if they don’t tax retirement benefits, they will find the money elsewhere — typically in property or sales taxes. And there are other considerations (/retirement/planning-for-retirement/info-2018/top-retirement-states-fd.html), too.

The Tax Foundation, a nonpartisan think tank, rates Alaska as one of the most tax-friendly states to live in. Your decision to move to Alaska should also take into account your fondness for cold winters and bears.

John Waggoner covers all things financial for AARP, from budgeting and taxes to retirement planning and Social Security. Previously he was a reporter for Kiplinger’s Personal Finance and USA Today and has written books on investing and the 2008 financial crisis. Waggoner’s USA Today investing column ran in dozens of newspapers for 25 years.

Also of Interest

- 10 things you need to know about your 2020 tax return (/money/taxes/info-2021/getting-ready-to-file-2020-taxes.html).
- Tax-Aide: Get free help online or in person (/money/taxes/info-2021/free-help-preparing-2020-returns.html).
- How to claim missing stimulus money when you file (/money/taxes/info-2021/how-to-claim-stimulus-on-tax-return.html).
Dear Arthur,

The pandemic has many of us being apart from those we care about. Some of the most heartless scammers seek to take advantage of this aloneness by tugging at heartstrings as a way to steal money. But be warned — "romance" scammers don’t limit themselves only to dating sites.

How It Works

- Scammers troll all online social venues — from Facebook to Words With Friends, and from dating sites to your neighborhood Listserv — looking to build personal rapport.

- What begins as a friendly encounter becomes something more, and soon your conversations move to text or another platform.

- Your new friend — even love interest — claims to be abroad with the military or perhaps working in another state or country.
What You Should Know

- Plans to meet in person always fall through — and the pandemic offers a believable excuse.
- Eventually, following weeks or even months of regular contact, there will come an urgent plea for financial help — perhaps to help deal with a business or medical emergency.
- You may be asked to send money by wire transfer or to buy gift cards and share the information off the back; you may even be asked to open a joint bank account or to send and receive money or packages on your love interest’s behalf.
- Eventually, the “relationship” ends — either by the love interest disappearing or when you realize it’s a scam.

What You Should Do

- Be on your guard when meeting new friends online; it’s too easy for impostors to pretend to be someone they aren’t.
- If you have a photo of them, use your browser’s image search feature to see if it shows up as someone other than who you believe it to be.
- Cut off contact immediately if you suspect the person is a scammer.
- Notify the platform (Facebook, dating site, Listserv, etc.).
- Report it to the FBI’s Internet Crime Complaint Center and the FTC.

When it comes to fraud, vigilance is our number one weapon. You have the power to protect yourself and your loved ones from scams. Please share this alert with friends and family and visit the Fraud Watch Network.

Sincerely,

Kathy Stokes
AARP Fraud Watch Network

P.S. Are you active on social media? Do you enjoy sharing information that can help prevent friends and family from falling victim to scams? Become a
volunteer AARP Fraud Watch Network (FWN) Digital Fraud Fighter! Interested? Send us a note at FWN@aarp.org for more information!

Get Help
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Tech Support Calling? Not So Fast

Dear Arthur,

With much attention focused on COVID-19 scams and stimulus payment scams, it’s easy to lose sight of some scams that just never go away. One perennial favorite of scammers is tech support. This scam often earns the criminal the ability to load malicious software onto your device to harvest credentials.

How It Works

- You get an unsolicited phone call or email from a big tech company like Microsoft or Apple, or you see a pop-up message on your screen warning that a virus or other malicious program has infected your device, and you need to call the number on the screen right away.
- A “technician” asks for remote access to your device, and once in, shows you some files that “prove” you have a major problem.
- The “technician” says they can fix your problem for a fee, and then may offer you a monthly subscription to keep your device safe.
Warning Signs

- Big tech companies like Microsoft or Apple say they don't call customers out of the blue to warn them of problems on their devices.
- The concerning files the "technician" may show you on your device are completely benign.
- The scammer may ask you to pay by purchasing a gift card and providing the account number and PIN — a sure sign that it's a scam, as is a request for payment by wire transfer.
- The scammer may call back months later and offer you a refund for some phony reason, asking for your bank account information to deposit the money; this is a ruse.
- Here's audio of a tech support scam call as recorded by the Federal Trade Commission.

What You Should Do

- Screen incoming calls with an answering machine or voicemail, and once you listen to the message, decide if it warrants a callback.
- If the caller claims you have a problem with your computer or the software on your computer, it is a scam, so don't engage or return the call.
- If you get a pop-up that freezes your screen, shut down your computer and restart it.
- Keep your security software, browser and operating system up to date.
- If you think your device is infected, get it checked out by a reputable source; most big-box electronics retailers offer tech support services.
- If you realize you've fallen victim to this scam, and you've paid by credit card, contact your financial institution to dispute the charge and to cancel any monthly fees you may have agreed to.

When it comes to fraud, vigilance is our number one weapon. You have the power to protect yourself and your loved ones from scams. Please share this alert with friends and family and visit the Fraud Watch Network.
Sincerely,

*Kathy Stokes*
AARP Fraud Watch Network

P.S. Are you active on social media? Do you enjoy sharing information that can help prevent friends and family from falling victim to scams? Become a volunteer AARP Fraud Watch Network (FWN) Digital Fraud Fighter! Interested? Send us a note at [FWN@aarp.org](mailto:FWN@aarp.org) for more information!

Get Help
To report a scam or for help if you or a loved one has fallen victim, contact the AARP Fraud Watch Network Helpline.

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